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|---|--|
| Patient Name : Mr.KIRAN RAMESH NAGAWADE | Collected : 21/Jun/2023 09:28AM |
| Age/Gender : 37 Y 6 M 0 D/M | Received : 21/Jun/2023 01:02PM |
| UHID/MR No : CKHA.0000067092 | Reported : 21/Jun/2023 02:30PM |
| Visit ID : CKHAOPV98828 | Status : Final Report |
| Ref Doctor : Dr.SELF | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 95133 | |

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - TMT - PAN INDIA - FY2324

PERIPHERAL SMEAR , WHOLE BLOOD-EDTA

RBCs ARE NORMOCYTIC NORMOCHROMIC.
TLC , DLC WITHIN NORMAL LIMIT. NO IMMATURE CELLS ARE SEEN.
PLATELETS ARE ADEQUATE.
NO HEMOPARASITES SEEN.



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DEPARTMENT OF HAEMATOLOGY

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HEMOGRAM , WHOLE BLOOD-EDTA

| | | | | |
|-----------------------------|-------|---------------|------------|--------------------------------|
| HAEMOGLOBIN | 15.4 | g/dL | 13-17 | Spectrophotometer |
| PCV | 45.20 | % | 40-50 | Electronic pulse & Calculation |
| RBC COUNT | 5.11 | Million/cu.mm | 4.5-5.5 | Electrical Impedence |
| MCV | 88.4 | fL | 83-101 | Calculated |
| MCH | 30.1 | pg | 27-32 | Calculated |
| MCHC | 34.1 | g/dL | 31.5-34.5 | Calculated |
| R.D.W | 13.8 | % | 11.6-14 | Calculated |
| TOTAL LEUCOCYTE COUNT (TLC) | 5,870 | cells/cu.mm | 4000-10000 | Electrical Impedence |

DIFFERENTIAL LEUCOCYTIC COUNT (DLC)

| | | | | |
|-------------|------|---|-------|----------------------|
| NEUTROPHILS | 63.8 | % | 40-80 | Electrical Impedence |
| LYMPHOCYTES | 28.2 | % | 20-40 | Electrical Impedence |
| EOSINOPHILS | 1.1 | % | 1-6 | Electrical Impedence |
| MONOCYTES | 6.6 | % | 2-10 | Electrical Impedence |
| BASOPHILS | 0.3 | % | <1-2 | Electrical Impedence |

ABSOLUTE LEUCOCYTE COUNT

| | | | | |
|-------------|---------|-------------|-----------|----------------------|
| NEUTROPHILS | 3745.06 | Cells/cu.mm | 2000-7000 | Electrical Impedence |
| LYMPHOCYTES | 1655.34 | Cells/cu.mm | 1000-3000 | Electrical Impedence |
| EOSINOPHILS | 64.57 | Cells/cu.mm | 20-500 | Electrical Impedence |
| MONOCYTES | 387.42 | Cells/cu.mm | 200-1000 | Electrical Impedence |
| BASOPHILS | 17.61 | Cells/cu.mm | 0-100 | Electrical Impedence |

PLATELET COUNT

| | | | | |
|----------------|--------|-------------|---------------|----------------------|
| PLATELET COUNT | 232000 | cells/cu.mm | 150000-410000 | Electrical impedence |
|----------------|--------|-------------|---------------|----------------------|

ERYTHROCYTE SEDIMENTATION RATE (ESR)

| | | | | |
|--------------------------------------|---|-------------------------|------|---------------------|
| ERYTHROCYTE SEDIMENTATION RATE (ESR) | 2 | mm at the end of 1 hour | 0-15 | Modified Westergren |
|--------------------------------------|---|-------------------------|------|---------------------|

PERIPHERAL SMEAR

RBCs ARE NORMOCYTIC NORMOCHROMIC.

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PLATELETS ARE ADEQUATE.

NO HEMOPARASITES SEEN.



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| Age/Gender : 37 Y 6 M 0 D/M | Received : 21/Jun/2023 01:02PM |
| UHID/MR No : CKHA.0000067092 | Reported : 21/Jun/2023 03:26PM |
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DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - TMT - PAN INDIA - FY2324

| Test Name | Result | Unit | Bio. Ref. Range | Method |
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|-----------|--------|------|-----------------|--------|

| BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD-EDTA | | | | |
|--|----------|--|--|-----------------------------|
| BLOOD GROUP TYPE | O | | | Microplate Hemagglutination |
| Rh TYPE | Positive | | | Microplate Hemagglutination |



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| Age/Gender : 37 Y 6 M 0 D/M | Received : 21/Jun/2023 01:23PM |
| UHID/MR No : CKHA.0000067092 | Reported : 21/Jun/2023 02:28PM |
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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - TMT - PAN INDIA - FY2324

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|-----------|--------|------|-----------------|--------|
|-----------|--------|------|-----------------|--------|

| | | | | |
|-------------------------------|-----|-------|--------|------------|
| GLUCOSE, FASTING , NAF PLASMA | 111 | mg/dL | 70-100 | HEXOKINASE |
|-------------------------------|-----|-------|--------|------------|

Comment:

As per American Diabetes Guidelines

| Fasting Glucose Values in mg/d L | Interpretation |
|----------------------------------|----------------|
| <100 mg/dL | Normal |
| 100-125 mg/dL | Prediabetes |
| ≥126 mg/dL | Diabetes |



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| Patient Name : Mr.KIRAN RAMESH NAGAWADE | Collected : 21/Jun/2023 12:20PM |
| Age/Gender : 37 Y 6 M 0 D/M | Received : 21/Jun/2023 02:57PM |
| UHID/MR No : CKHA.0000067092 | Reported : 21/Jun/2023 04:11PM |
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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - TMT - PAN INDIA - FY2324

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|--|--------|-------|-----------------|------------|
| GLUCOSE, POST PRANDIAL (PP), 2 HOURS , NAF PLASMA | 118 | mg/dL | 70-140 | HEXOKINASE |

Comment:

It is recommended that FBS and PPBS should be interpreted with respect to their Biological reference ranges and not with each other.

Conditions which may lead to lower postprandial glucose levels as compared to fasting glucose levels may be due to reactive hypoglycemia, dietary meal content, duration or timing of sampling after food digestion and absorption, medications such as insulin preparations, sulfonylureas, amylin analogues, or conditions such as overproduction of insulin.

Ref: Marks medical biochemistry and clinical approach



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| UHID/MR No : CKHA.0000067092 | Reported : 21/Jun/2023 02:56PM |
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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - TMT - PAN INDIA - FY2324

| Test Name | Result | Unit | Bio. Ref. Range | Method |
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|-----------|--------|------|-----------------|--------|

| | | | | |
|---|-----|-------|--|------------|
| HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD-EDTA | 5.7 | % | | HPLC |
| ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD-EDTA | 117 | mg/dL | | Calculated |

Comment:

Reference Range as per American Diabetes Association (ADA):

| REFERENCE GROUP | HBA1C IN % |
|-------------------------------|------------|
| NON DIABETIC ADULTS >18 YEARS | <5.7 |
| AT RISK (PREDIABETES) | 5.7 – 6.4 |
| DIAGNOSING DIABETES | ≥ 6.5 |
| DIABETICS | |
| · EXCELLENT CONTROL | 6 – 7 |
| · FAIR TO GOOD CONTROL | 7 – 8 |
| · UNSATISFACTORY CONTROL | 8 – 10 |
| · POOR CONTROL | >10 |

Note: Dietary preparation or fasting is not required.

1. A1C test should be performed at least two times a year in patients who are meeting treatment goals (and who have stable glycemic control).
2. Lowering A1C to below or around 7% has been shown to reduce microvascular and neuropathic complications of type 1 and type 2 diabetes. When mean annual HbA1c is <1.1 times ULN (upper limit of normal), renal and retinal complications are rare, but complications occur in >70% of cases when HbA1c is >1.7 times ULN.
3. Falsely low HbA1c (below 4%) may be observed in patients with clinical conditions that shorten erythrocyte life span or decrease mean erythrocyte age. HbA1c may not accurately reflect glycemic control when clinical conditions that affect erythrocyte survival are present. Fructosamine may be used as an alternate measurement of glycemic control



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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - TMT - PAN INDIA - FY2324

| Test Name | Result | Unit | Bio. Ref. Range | Method |
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|-----------|--------|------|-----------------|--------|

LIPID PROFILE , SERUM

| | | | | |
|---------------------|--------------|-------|--------|----------------------------|
| TOTAL CHOLESTEROL | 182 | mg/dL | <200 | CHO-POD |
| TRIGLYCERIDES | 301 | mg/dL | <150 | GPO-POD |
| HDL CHOLESTEROL | 45 | mg/dL | 40-60 | Enzymatic Immunoinhibition |
| NON-HDL CHOLESTEROL | 137 | mg/dL | <130 | Calculated |
| LDL CHOLESTEROL | 76.94 | mg/dL | <100 | Calculated |
| VLDL CHOLESTEROL | 60.13 | mg/dL | <30 | Calculated |
| CHOL / HDL RATIO | 4.04 | | 0-4.97 | Calculated |

Comment:

Reference Interval as per National Cholesterol Education Program (NCEP) Adult Treatment Panel III Report.

| | Desirable | Borderline High | High | Very High |
|---------------------|--|-----------------|-----------|-----------|
| TOTAL CHOLESTEROL | < 200 | 200 - 239 | ≥ 240 | |
| TRIGLYCERIDES | <150 | 150 - 199 | 200 - 499 | ≥ 500 |
| LDL | Optimal < 100 Near Optimal 100-129 | 130 - 159 | 160 - 189 | ≥ 190 |
| HDL | ≥ 60 | | | |
| NON-HDL CHOLESTEROL | Optimal <130; Above Optimal 130-159 | 160-189 | 190-219 | >220 |

Measurements in the same patient can show physiological and analytical variations.

NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.



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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - TMT - PAN INDIA - FY2324

| Test Name | Result | Unit | Bio. Ref. Range | Method |
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LIVER FUNCTION TEST (LFT) , SERUM

| | | | | |
|---------------------------------------|-------|-------|---------|--------------------|
| BILIRUBIN, TOTAL | 0.96 | mg/dL | 0.3-1.2 | DPD |
| BILIRUBIN CONJUGATED (DIRECT) | 0.17 | mg/dL | <0.2 | DPD |
| BILIRUBIN (INDIRECT) | 0.79 | mg/dL | 0.0-1.1 | Dual Wavelength |
| ALANINE AMINOTRANSFERASE (ALT/SGPT) | 34.6 | U/L | <50 | IFCC |
| ASPARTATE AMINOTRANSFERASE (AST/SGOT) | 28.3 | U/L | <50 | IFCC |
| ALKALINE PHOSPHATASE | 86.54 | U/L | 30-120 | IFCC |
| PROTEIN, TOTAL | 7.11 | g/dL | 6.6-8.3 | Biuret |
| ALBUMIN | 4.05 | g/dL | 3.5-5.2 | BROMO CRESOL GREEN |
| GLOBULIN | 3.06 | g/dL | 2.0-3.5 | Calculated |
| A/G RATIO | 1.32 | | 0.9-2.0 | Calculated |



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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - TMT - PAN INDIA - FY2324

| Test Name | Result | Unit | Bio. Ref. Range | Method |
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|-----------|--------|------|-----------------|--------|

| RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM | | | | |
|--|-------------|--------|-------------|--------------------------|
| CREATININE | 0.86 | mg/dL | 0.72 – 1.18 | Modified Jaffe, Kinetic |
| UREA | 20.38 | mg/dL | 17-43 | GLDH, Kinetic Assay |
| BLOOD UREA NITROGEN | 9.5 | mg/dL | 8.0 - 23.0 | Calculated |
| URIC ACID | 6.61 | mg/dL | 3.5–7.2 | Uricase PAP |
| CALCIUM | 9.17 | mg/dL | 8.8-10.6 | Arsenazo III |
| PHOSPHORUS, INORGANIC | 2.18 | mg/dL | 2.5-4.5 | Phosphomolybdate Complex |
| SODIUM | 141.14 | mmol/L | 136–146 | ISE (Indirect) |
| POTASSIUM | 4.1 | mmol/L | 3.5–5.1 | ISE (Indirect) |
| CHLORIDE | 104.19 | mmol/L | 101–109 | ISE (Indirect) |



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DEPARTMENT OF BIOCHEMISTRY

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| Test Name | Result | Unit | Bio. Ref. Range | Method |
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| GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM | 36.50 | U/L | <55 | IFCC |



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DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - TMT - PAN INDIA - FY2324

| Test Name | Result | Unit | Bio. Ref. Range | Method |
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|-----------|--------|------|-----------------|--------|

THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM

| | | | | |
|-----------------------------------|-------|--------|------------|------|
| TRI-iodothyronine (T3, TOTAL) | 1.09 | ng/mL | 0.7-2.04 | CLIA |
| Thyroxine (T4, TOTAL) | 8.42 | µg/dL | 6.09-12.23 | CLIA |
| Thyroid Stimulating Hormone (TSH) | 2.107 | µIU/mL | 0.34-5.60 | CLIA |

Comment:

Serum TSH concentrations exhibit a diurnal variation with the peak occurring during the night and the nadir occurring between 10 a.m. and 4 p.m. In primary hypothyroidism, thyroid-stimulating hormone (TSH) levels will be elevated. In primary hyperthyroidism, TSH levels will be low. Elevated or low TSH in the context of normal free thyroxine is often referred to as subclinical hypo- or hyperthyroid-ism, respectively. Physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy.

Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.

Note:

| For pregnant females | Bio Ref Range for TSH in uIU/ml (As per American Thyroid Association) |
|----------------------|---|
| First trimester | 0.1 - 2.5 |
| Second trimester | 0.2 - 3.0 |
| Third trimester | 0.3 - 3.0 |



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DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - TMT - PAN INDIA - FY2324

| Test Name | Result | Unit | Bio. Ref. Range | Method |
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COMPLETE URINE EXAMINATION (CUE) , URINE

PHYSICAL EXAMINATION

| | | | | |
|--------------|-------------|--|-------------|------------------|
| COLOUR | PALE YELLOW | | PALE YELLOW | Visual |
| TRANSPARENCY | CLEAR | | CLEAR | Visual |
| pH | 6.0 | | 5-7.5 | DOUBLE INDICATOR |
| SP. GRAVITY | >1.025 | | 1.002-1.030 | Bromothymol Blue |

BIOCHEMICAL EXAMINATION

| | | | | |
|------------------------|----------|--|----------|----------------------------|
| URINE PROTEIN | NEGATIVE | | NEGATIVE | PROTEIN ERROR OF INDICATOR |
| GLUCOSE | NEGATIVE | | NEGATIVE | GLUCOSE OXIDASE |
| URINE BILIRUBIN | NEGATIVE | | NEGATIVE | AZO COUPLING REACTION |
| URINE KETONES (RANDOM) | NEGATIVE | | NEGATIVE | SODIUM NITRO PRUSSIDE |
| UROBILINOGEN | NORMAL | | NORMAL | MODIFIED EHRlich REACTION |
| BLOOD | NEGATIVE | | NEGATIVE | Peroxidase |
| NITRITE | NEGATIVE | | NEGATIVE | Diazotization |
| LEUCOCYTE ESTERASE | NEGATIVE | | NEGATIVE | LEUCOCYTE ESTERASE |

CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY

| | | | | |
|------------------|--------|------|------------------|------------|
| PUS CELLS | 2 - 3 | /hpf | 0-5 | Microscopy |
| EPITHELIAL CELLS | 1 - 2 | /hpf | <10 | MICROSCOPY |
| RBC | NIL | /hpf | 0-2 | MICROSCOPY |
| CASTS | NIL | | 0-2 Hyaline Cast | MICROSCOPY |
| CRYSTALS | ABSENT | | ABSENT | MICROSCOPY |



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DEPARTMENT OF CLINICAL PATHOLOGY

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| Test Name | Result | Unit | Bio. Ref. Range | Method |
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| URINE GLUCOSE(POST PRANDIAL) | POSITIVE +++ | | NEGATIVE | Dipstick |
| URINE GLUCOSE(FASTING) | NEGATIVE | | NEGATIVE | Dipstick |

*** End Of Report ***


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